

# KDHE Update



# Overview

- Office of Inspector General Update
- Enrollment Update
- KEES Update
- Pay for Performance Update
  - Physical Health Measures
  - Behavioral Health & Disability Measures
  - Nursing Facility Measures
- Health Homes Update



# Medicaid Inspector General Update

- History of Office of Inspector General
  - Staffing
- Current Status



# Enrollment Update

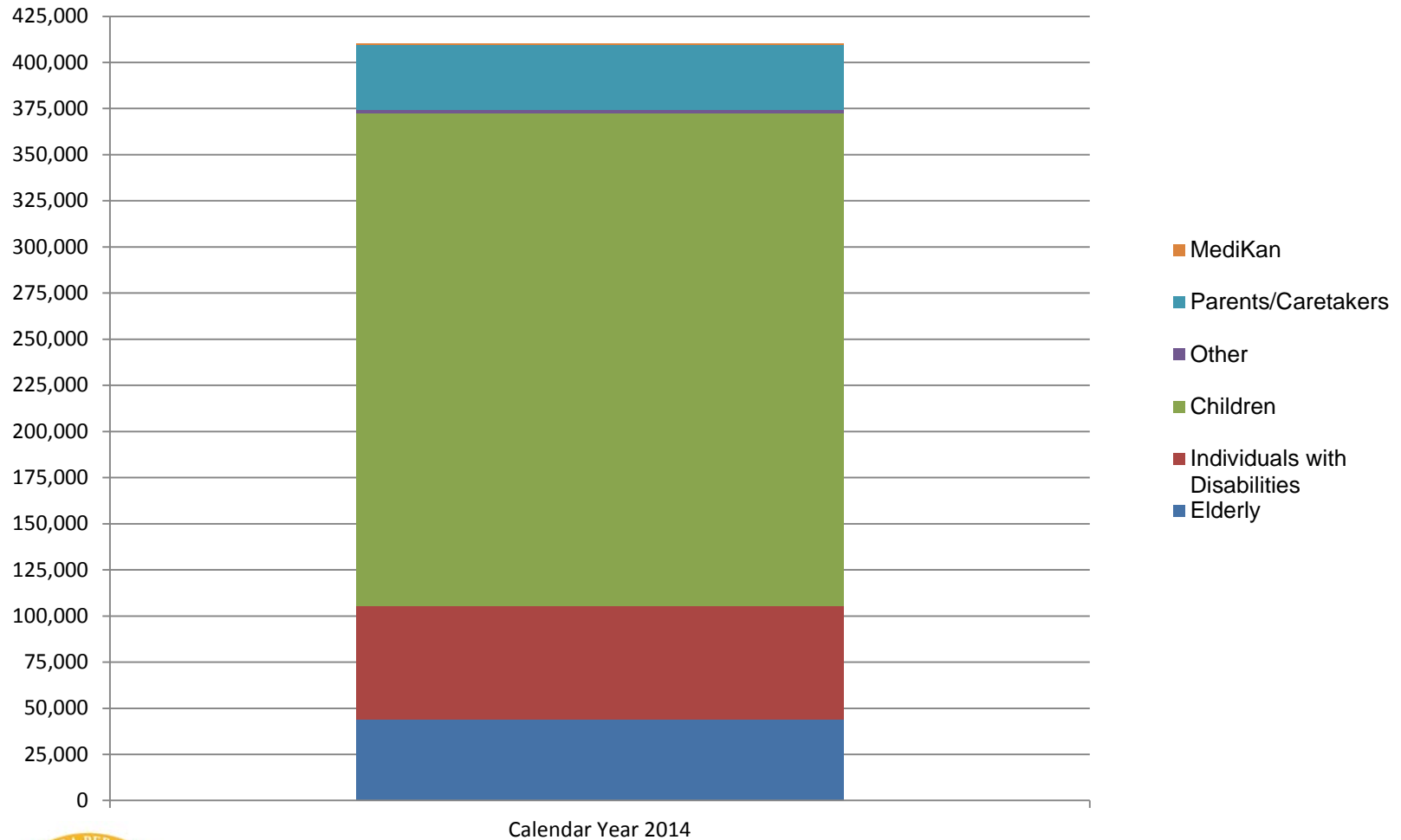
## Total Medicaid/CHIP:

	Medicaid	CHIP	Total
October	344,574	56,905	401,479
November	346,331	56,803	403,134
December	350,294	56,194	406,488
January	354,821	56,057	410,878
February	358,928	56,356	415,284
March	363,360	57,127	420,487
April	368,981	57,379	426,360
May	369,784	57,099	426,883
June	369,707	56,314	426,021



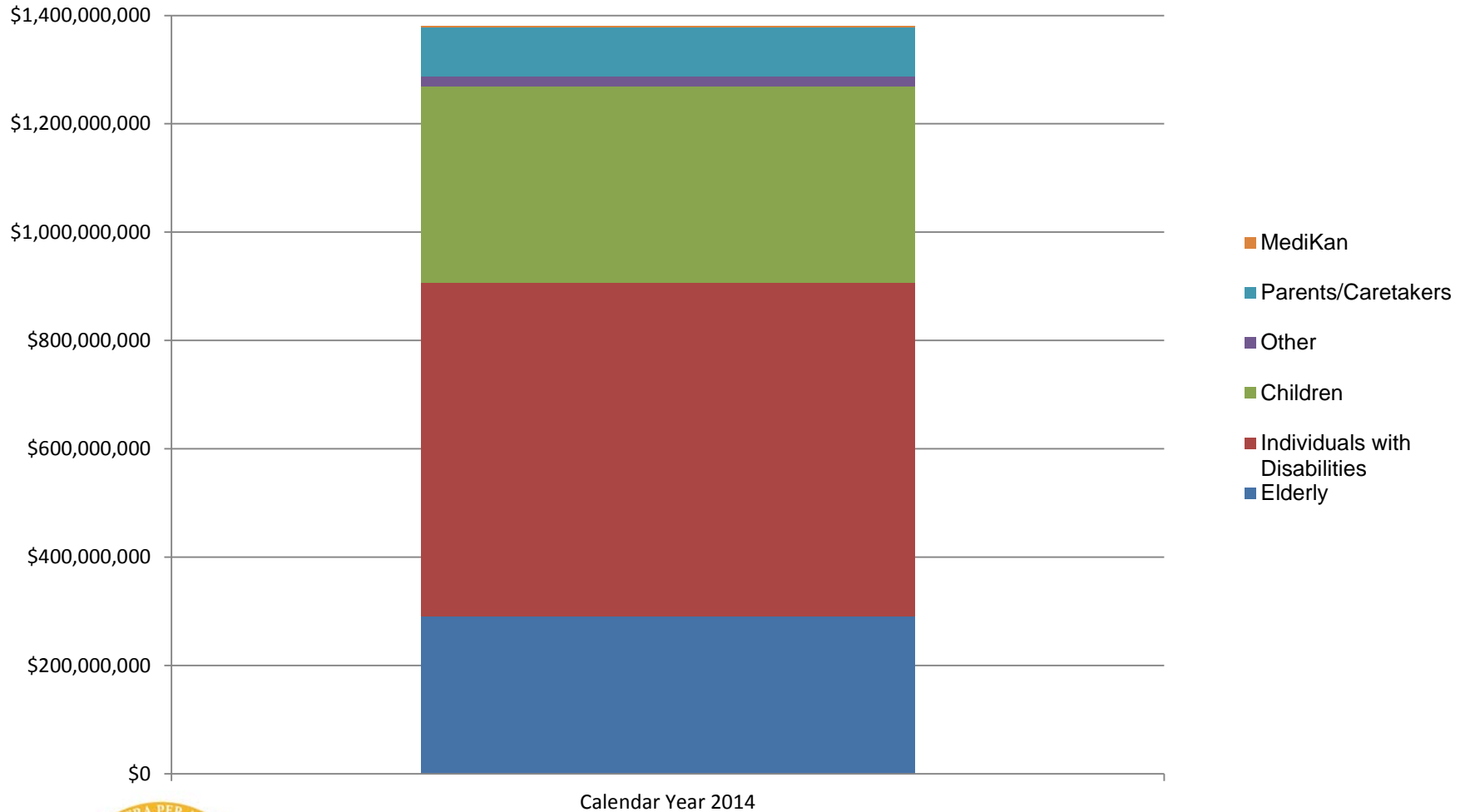
# Enrollment Update

## Eligibility Composition CY 2014



# Enrollment Update

## Expenditure Composition CY 2014



# Application Trends

## Applications by Month - Clearinghouse:

Month	Applications			
	Applications* Received	Members Eligible for Medicaid	Members Eligible for CHIP	Ineligible
Jan. 2014	10,002	8,438	901	6,331
Feb. 2014	7,748	7,216	825	5,222
March 2014	9,494	6,308	739	4,256
April 2014	8,126	8,657	848	5,997
May 2014	6,928	5,880	599	3,661
June 2014	7,042	7,036	547	3,345

\* Applications may have multiple household members.

# Enrollment: Looking Ahead

- While most anticipated growth has already been realized in current enrollment, KDHE projects additional “woodwork”-related growth of 3,200 in the remainder of SFY 2014, and 10,200 in SFY 2015.
- Another wave of applications is expected with the activation of Account Transfer from FFM, occurring this month (August).





# KEES

- KEES has completed the build, system testing and user acceptance testing of the basic system functions to perform Medicaid eligibility processing and is now focused on completing critical enhancements that will improve the efficiency of the eligibility workforce.
- KEES has implemented release 2.5 as a production pilot that is providing for extended training of the eligibility staff to ensure they have the practical experience necessary to effectively use the system at startup.

# KEES (Cont.)

- KEES is completing the work to eliminate a step in the application process for Kansans who have applied for Health Insurance at the Federal marketplace but may be eligible for KanCare.
- KEES has requested for CMS to move the account transfer interface into production on August 15, 2014. This provides for a seamless Medicaid application process for Kansans by automatically transferring their applications from the Marketplace when they are assessed to be eligible for Medicaid benefits.



# Outcomes Reporting Timeline

- Physical health measure data collected after first quarter of each subsequent year (2013 complete after March 2014)
  - Reported to NCQA by June, with cumulative national results (establishing percentiles) released by NCQA in July
- Spring CAHPS survey results expected July-August
- Behavioral health survey results available in fall
- NOMs measured quarterly
- HCBS waiver performance measures measured quarterly, reported annually per 1915(c) waiver
- New state-developed measures (increased employment, etc.), generally reported 60 days after each quarter



# Recurring Cycle

Services delivered during calendar year (Baseline set when applicable; results based on targets thereafter)

Medical record (results) data collected/analyzed May-June

Member surveys (CAHPS for sample of all and mental health for sample of those members) start in Spring; collected Summer; results late Fall.

Administrative (claims) data collected/analyzed March-April  
(For some measures - HCBS, Behavioral Health or state developed - this recurs quarterly)

Results reported to NCQA; cumulative national results reported - preliminary in July; comparative percentiles in Oct.

# Pay for Performance

## Physical Health Measures

- Comprehensive Diabetes Care (CDC)
- Well Child Visits – Four or more in the First Seven Months of Life, post-hospital discharge after birth.
- Preterm Births
- Annual Monitoring for Patients on Persistent Medications (MPM)
- Follow-up After Hospitalization for Mental Illness (FUH)

# Pay for Performance

## Behavior Health & Disability Measures

- Increased Competitive Employment – members eligible for SPMI, SED waiver, WORK (PD, I/DD, TBI) or I/DD waiver services
- National Outcomes Measures (NOMS) – members eligible for SUD, SPMI or SED waiver services
- Number and percent of members utilizing inpatient psychiatric services, including state psychiatric facilities and private inpatient mental health services
- Improved Health Life Expectancy (interim proxy for Improved Life Expectancy) – members eligible for PD waiver, I/DD waiver or SMI services
- Improved Integration of Care – members using HCBS waiver services



# Pay for Performance

## Nursing Facility Measures

- Decreased number of NF claims denied by MCOs
- Decreased number of NF Residents having a fall with a major injury
- Decreased percentage of members discharged from an NF having hospital admission within 30 Days
- Decreased rate of NF days used per eligible members
- Increase in number of Person- Centered Care Homes



# Health Homes Update

## Serious Mental Illness

- SPA submitted and approved July 28, 2014
- Enrollment in SMI Health Homes began July 1, 2014
- Services began through the SMI Health Home on August 1, 2014





# Health Homes Update

## Chronic Conditions

- We continue to work with providers to ensure people enrolled in a Chronic Condition Health Home has a choice of provider
- Assessment of the provider network is ongoing





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